PART B - FEE(S) TRANSMITTAL

Complete and sen'd this form, together with applicable fee(s), to: Mail

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885



or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 04586 7590 08/15/2005 ROSENBERG, KLEIN & LEE 3458 ELLICOTT CENTER DRIVE-SUITE 101 ELLICOTT CITY, MD 21043 SEP 2 8				Note: A certificate of mailing can only be used for domestic mailings of th Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below.		
		THE STATE OF THE S	18/			(Depositor's name)
		A TE	ADEMARIT			(Signature)
						(Date)
APPLICATION NO.	FILING DATE	F	IRST NAMED INVE	NTOR ·	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,646	07/25/2003	<u></u>	Jeny Wang		MR3003-56	1413
FITLE OF INVENTION: T	ESTING METHOD OF AR	RAY CONFIGURA	TION FOR MULT	IPLE DISK-ARRAY S	YSTEM	
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	3 P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700 -09/29/2005 CNGUYEN3	11/15/2005 00000051 10626646
EXAMINER		ART UNI	r	CLASS- SUBCLASS 1		1400.00 OP
HUYNH, KIM NGOC		2182		710-001000	~01 FC:1501 02 FC:1504	300.00 OP
CFR 1.363). Change of correspond Address form PTO/SB/1 Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Via Techt	s an assignee is identified b n 37 CFR 3.11. Completion IEE nologies Inc.	Correspondence ation form e of a Customer E PRINTED ON Ti clow, no assignee dof this form is NOT	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment. 3) RESIDENCE: (CITY and STATE OR COUNTRY) Taipei, Taiwan, R.O.C.			
					orporation or other private gr	roup entity Government
4a. The following fee(s) areIssue Fee	enciosed:		b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.			
☑ Publication Fee (No small entity discount permitted)						
Advance Order - # of Copies			□ Payment by credit card. Form PTO-2038 is attached any deficiencies □ The Director is hereby authorized by charge 性故 政政政政政政政政 or credit any overpayment, to Deposit Account Number 18-2011 (enclose an extra copy of this form).			
_ ` '	(from status indicated above	,	-ı			
	MALL ENTITY status. See				LL ENTITY status. See 37 (
NOTE: The Issue Fee and P	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	vill not be accepted	from anyone other	o re-apply any previous than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	cation identified above. the assignee or other party in
Authorized Signature Mortan Jone			nly	Date 9/27/05		
Typed or printed name _	Morton J. Ro	senberg	<u> </u>	Registration	1 No. 26,049	
This collection of information application. Confidential submitting the completed a his form and/or suggestion. Sox 1450, Alexandria, Virga Nexandria, Virga 22313.	pplication form to the USPT s for reducing this burden, sl tinia 22313-1450. DO NOT	11. The information 122 and 37 CFR 1. O. Time will vary displayed be sent to the SEND FEES OR CO	is required to obta 14. This collection epending upon the Chief Information DMPLETED FORM	in or retain a benefit by is estimated to take 12 individual case. Any co Officer, U.S. Patent and MS TO THIS ADDRESS	the public which is to file (ar minutes to complete, includi omments on the amount of t Trademark Office, U.S. Dep S. SEND TO: Commissioner	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.